



PATIENT

Maple Snell

SPECIES

Canine

BREED

Cavoodle

SEX

FS

AGE

4

WEIGHT

4

INTERPRETED BY

Sebastian Schaub, DVM
Dr. med. vet.
DipECVDI

IMAGING PERFORMED BY

Henry Xue

HOSPITAL NAME

Belconnen Veterinary
Centre

REFERRING VET

Henry Xue

INVOICE

73989

DATE

3-1-26

PRESENTING CLINICAL SIGNS

- acute onset of RH lameness
- fast progressive, unwilling to move
- not responding to meloxicam

Abnormal PE/Chem/CBC/UA Results: R hip painful in extension ALT 496

COMPUTED TOMOGRAPHY OF THE LUMBAR SPINE & ABDOMEN

A pre- and post-contrast CT study of the lumbar spine and abdomen in a bone and soft tissue reconstruction is provided for review.

COMPUTED TOMOGRAPHIC FINDINGS

Spine

The ribs of T13 are fused to the vertebral body.

Level with L5/L6 at the lateral aspect of the right neuroforamen, irregular hyperattenuating material is appreciated – bulging medially into the right neuroforamen L5/L6. The hyperattenuating material at the lateral aspect of the right neuroforamen L5/L6 is extending approximately over the entire height of the respective neuroforamen.

Multifocal along the lumbar spine, spondylosis formation is seen.

Mineral attenuating material is associated with the renal pelvis bilaterally.

Abdomen

The serosal fat presents normal attenuation behavior. There is no evidence of peritoneal effusion or peritonitis.

Both kidneys present within normal limits for size, shape and organ architecture. After contrast administration, a bilaterally symmetric and uniform nephro- and pyelogram is noted.

The adrenal glands are within normal limits for size, shape and organ architecture.

Both liver and spleen present with normal shape, even surface, uniformly attenuating parenchyma and homogeneous contrast enhancement, unremarkable.

The portal vein presents a normal order of its tributary veins and intrahepatic branching. No abnormal vessel is noted inside and outside of the liver parenchyma.

The pancreas is evenly contoured; the pancreatic parenchyma is homogeneous and presents uniform contrast enhancement.

The position, delineation, wall and content of the gastrointestinal tract are considered within normal limits throughout.

The bony and surrounding soft tissue structures reveal no abnormalities.

COMPUTED TOMOGRAPHIC DIAGNOSIS

- Right sided far lateral intervertebral disc extrusion L5/L6 and secondary neuroforaminal stenosis
- Multifocal spondylosis formation along the lumbar spine
- Nephrolithiasis without mechanical obstruction



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- Normal abdomen

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

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The right sided far lateral herniated intervertebral disc L5/L6 is a plausible explanation for the right hind limb lameness, due to secondary impingement of the right spinal nerve L5. Surgical management appears beneficial.

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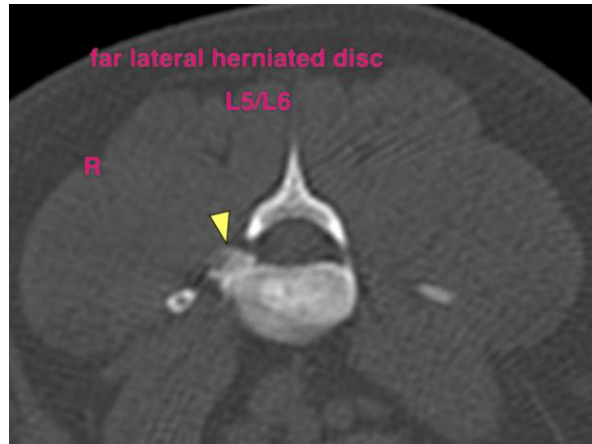
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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Thank you for this referral. If the clinical or image interpretation does not parallel your findings or if I can be of any further assistance please contact me.

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Sebastian Schaub, Sebastian Schaub, DVM, Dr. med. vet. DipECVDI

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